

TESTIMONY

CONGRESS OF THE UNITED STATES HOUSE OF REPRESENTATIVES COMMITTEE ON GOVERNMENT REFORM OCTOBER 30, 2003

Hearing on the proposed transformation of the U.S. Public Health Services Commissioned Corps

I am Julius B. Richmond, M.D. I served as Assistant Secretary for Health in the Department of Health and Human Services and Surgeon-General of the U.S. Public Health Service from 1977 to 1981. Prior to that I served as the first Director of the Head Start Program and the Community Health Centers Program of the Office of Economic Opportunity from 1965 to 1967. I currently am the John D. MacArthur Professor of Health Policy, Emeritus at Harvard University.

Mr. Chairman, your committee today addresses an important issue before the nation: our preparedness to deal with medical emergencies and the proposed transformation of the U.S. Public Health Service Commissioned Corps to deal with such emergencies. At the outset I would state that I am always in favor of self-evaluation and constant attention to improving functional capacity. But I also believe that changes should be based on history and past performance.

In the context of history, we have reason to be proud of the record of the U.S. Public Health Service and its Commissioned Corps in responding to emergencies, which threaten the health of our people. History tells us that its response to health emergencies has always been full and effective. This reflects its constant training for emergency preparedness. Let me illustrate briefly.

On September 11, 2001, our most significant health threat recently, Secretary Thompson was able to go on national television to tell our people how the U.S. Public Health Service was responding. Under the leadership of the then Surgeon-General, Dr. David Satcher, help to the people of New York—including mental health efforts—were provided as needed. We should all be proud of this demonstration of effectiveness.

I would add some examples with which I was personally involved:

- The Mariel boat refugees from Cuba. When the Cuban government sent hundreds of mental hospital patients and criminals to our shores, the Public Health Services responded with great ingenuity and care.
- The Southeast Asian crisis in the late 1970's when many refugees fled their country in boats, they were sent to the U.S. from camps in Southeast Asia. A concern over a possible epidemic of tuberculosis in the U.S. developed because of refugees arriving

with the disease. Within a 24-hour period Public Health Service officers were dispatched to the camps to set up a screening program.

- The Three-mile Island Nuclear Plant disaster may be the greatest public health threat this nation has experienced. Action was required instantly. Again under the leadership of the Surgeon-General's office, CDC officers were on the scene in Pennsylvania monitoring the crisis. The nation owes them a great debt for documenting events and carrying on studies of the exposed population. In a lifetime of professional experience, I have never witnessed a more courageous and competent effort.

I mention these events because these responses are not fortuitous; they result from cultivating a Corps of highly competent professionals. Their competence is generated from their assignments in the operating agencies of the Public Health Service. Combined with a high degree of flexibility, effective responses develop. No set of regulations, however well intended—including those for the proposed transformation—can replace the need for a high degree of flexibility.

My concerns over the proposed transformation are the following:

- The agency heads should constitute a governing council for deployment of officers, which could act in concert with the Surgeon-General. The current proposals do not take into account the concerns of the leadership of the Public Health Service agencies and the need to maintain our public health infrastructure under all circumstances.
- The Surgeon-General should unequivocally be the leader of the Corps—including its planning and management functions. It violates any sound principles of management to propose an Office of Commissioned Corps Force Management to assume functions that the Surgeon-General has had historically.
- Flexibility should prevail in the evaluation and assignment of officers. This should prevail as well in the physical fitness requirements. The important issue is whether the officer can perform assigned duties. Parenthetically, I would add that I served for four years in World War II as a flight surgeon. Had we held to arbitrary standards we would have lost much valuable person-power. I could illustrate with many examples.

In summary, we can always do better. But the Department of Health and Human Services and its Public Health Service has a stellar record in responding to the health needs of the nation. This is due to its sound organizational structure and excellent leadership. We should enhance its efforts and not engage in changes, which will impair its efforts by creating new problems. In other words, we must be aware of unintended consequences.